

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SEARCH NO.
07/478/68

APPLICANT(S)

FILING DATE

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3						
4	2	2				
5						
6	1					
7	1					
8	2	2				
9	2	2				
10	2	2				
11	2	2				
12	2	2				
13	2	2				
14	2	2				
15	2	2				
16	2	2				
17	2	2				
18	2	2				
19	1					
20	1					
21		1				
22	3	3				
23	3	3				
24	1					
25	1					
26	3	3				
27	3	3				
28	3	3				
29	3	3				
30	3	3				
31	3	3				
32	3	3				
33	1	1				
34	1	1				
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48						
49						
50						
TOTAL IND.	2					
TOTAL DEP.	58	58	58	58	58	58
TOTAL CLAIMS	162	162	162	162	162	162

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

BEST AVAILABLE COPY